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Date: September 12, 2006
To: Jermie E. Cozart - 3726
Location: United States Patent and Trademark Office
Fax No.: 571-273-8300
From: Gary J. Cunningham - 33,488
Subject: 10/702,346- Bratek, et al. Confirmation No.: 8107

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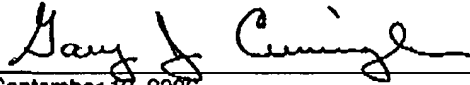
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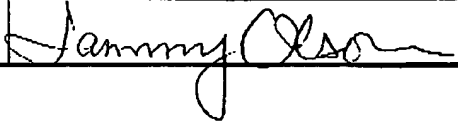
Enclosed herewith, please find a NOTICE OF APPEAL for filing in the above-identified application.

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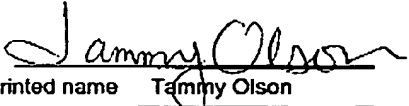
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/702,346
	Filing Date	November 6, 2003
	First Named Inventor	Bratek, et al.
	Group Art Unit	3726
	Examiner Name	Jermie E. Cozart
	Attorney Docket Number	IS01350AP
Total Number of Pages in this Submission		

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Gary J. Cunningham	Registration No.	33,488
Signature			
Date	September 12, 2006		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number <u>703-872-9306</u> or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on the date listed below:			
Typed or printed name	Tammy Olson		
Signature		Date	September 12, 2006

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number IS01350AP
I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450" on September 12, 2006 Signature  Typed or printed name <u>Tammy Olson</u>	In re Application of	Bratek, et al.
	Application Number	10/702,346
	Filed	November 6, 2003
	For	HIGH PRESSURE SENSOR WITH KNURL PRESS-FIT ASSEMBLY
	Art Group	3726
	Examiner	Jermie E. Cozart
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 503987. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>33,488</u> <input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____ NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below". <input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.		

This collection of information is required by 37 CFR 1.91. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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